



## <u>Supervisor Comment Page –</u> <u>Group JCQ Cover Sheet Page 3</u>

Employee Name:	
Agency:	
Classification on Group Questionnaire:	
Carefully review the completed employee Job Content Questionnaire to be sure it gives a complete and accurate picture of the position responsibilities, job requirements, and working conditions.	
Do you agree that the employee's questionnaire provides a complete and accurate description of the job?  Mark the appropriate box below with an "X".	
Yes	NO
Yes NO  If NO, provide a detailed explanation.	
In your words, what is the primary function or purpose of this position in relation to the mission, goals and objectives of the agency?	





## <u>Supervisor Comment Page – </u>

## **Group JCQ Cover Sheet Page 3 Continued**

What do you consider this position's most important responsibility or performance result?	
Other general comments related to this position.	
Supervisor Name: (please print)	
Supervisor Signature:	
Date:	

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